

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the f Conversely, failure to file the appropriate federal notice will not result in a lo state exemption unless such exemption is predicated on the filing of a feder



UNITED STATES SECURITIES AND EXCHANGE COMMISSIÓN Washington, D.C. 20549 PECEIVED

FORM D

NOTICE OF SALE OF SECURPTIES

OMB APPROVAL OMB Number: 3235-0076 May 31, 2005 Expires: Estimated average burden hours per response ...

> SEC USE ONLY Prefix Serial

1295520 SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION	DATE RECEIVED
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Series A-1 and A-2 Preferred Stock Financing	
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Senforce Technologies, Inc.	· · · · · · · · · · · · · · · · · · ·
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
147 W. Election Road, Suite 110, Draper, UT 84020	(801) 838-7878
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	DONECCE
Development of telecommunications components.	10 - NOCLOCK
Type of Business Organization	// AUG 1 0 2004
	(please specify):
business trust limited partnership, to be formed	IHOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year 0 7 0 0 0	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	•
CN for Canada; FN for other foreign jurisdiction) D E	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

		A. BASIC IDENT	IFICATION DATA								
2. Enter the information re	quested for the follo	owing:									
• Each promoter of t	he issuer, if the issu	er has been organized with	in the past five years;								
		-	direct the vote or dispos	ition of, 10% or	more of a class of equity						
securities of the iss			•	ŕ	1 7						
 Each executive off 	icer and director of	corporate issuers and of co	rporate general and manag	ing partners of par	tnership issuers; and						
Each general and managing partner of partnership issuers.											
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	⊠ Director	General and/or Managing Partner						
Full Name (Last name first, if individual)											
Thompson, Allan G.											
		ant City State 7im Code									
Business or Residence Addre	•			4030							
			Suite 110, Draper, UT 84								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner						
Full Name (Last name first, i	f individual)										
Moon, Davi	d C.										
Business or Residence Addre	ess (Number and Str	eet, City, State, Zip Code)									
	•	N. Edgewood Drive, Ste.		•							
Check Box(es) that	Promoter	Beneficial Owner	Executive Officer	Director	General and/or						
Apply:					Managing Partner						
Full Name (Last name first, i	· · · · · · · · · · · · · · · · · · ·										
Adams, Dav	'id										
Business or Residence Addre	•										
c/o Rocket V	Ventures II SBIC, I	L.P., 3000 Sand Hill Road	ł, Ste. 1-170, Menio Park,	, CA 94025							
Check Box(es) that Apply:	□ Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner						
Full Name (Last name first, i	f individual)										
Ebert, Kenr	•										
Business or Residence Addre	ess (Number and Str	eet City State Zin Code)									
		odland Hills, UT 84653									
Check Box(es) that	⊠ Promoter	□Beneficial Owner	Executive Officer	Director	General and/or						
Apply:	Z Promoter	Beneficial Owner			Managing Partner						
Full Name (Last name first, i	f individual)										
Jasper, Pan	•										
Business or Residence Addre	ess (Number and Str	eet City State Zin Code)									
	ier Summit Dr., Dr										
			Dr								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner						
Full Name (Last name first, i		*									
Smith, Mer	rill K.										
Business or Residence Addre	ess (Number and Str	eet, City, State, Zip Code)									
	,	h, Riverton, UT 84065									
_		,,									
	(Ilea blank a	Land	litianal capies of this shee	4							

		A DACKG IDENTITY			
2 Entered to information and			FICATION DATA		
2. Enter the information req	-	•	in the most five season.		
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		corporate issuers and of co	morate general and manag	ing portners of po	rtnarchin iconarc and
Each general and make the second control of the second contro			rporate general and manag	ing partners or pa	ruleiship issuers, and
		i i			
Check Box(es) that Apply:	Premoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				- Tranaging Fairner
Wright, Micl	•				
		G: 0 7: 0 1)			
Business or Residence Address		- · · · · · · · · · · · · · · · · · · ·			
		c., 266 W. Center Street, (
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
E-Net Three,	, L.L.C.				
Business or Residence Address	ss (Number and Str	reet, City, State, Zip Code)			
		350, Provo, UT 84604			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or
Check Box(es) that Apply.	I Tollloter		Executive officer	Montector	Managing Partner
Full Name (Last name first, if	individual)	·	······································		
Paul Ahlstro					
Business or Residence Address	cs (Number and St	reet City State 7 in Code			
	,				
c/o vSpring Capital, 2	795 E. Collonwoo	d Parkway, Ste. 360, Salt	Lake City, UI 04121		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
•	ures II SBÍC, L.P.	•			
Business or Residence Address	ss (Number and St	reet City State Zin Code)			
	•	70, Menlo Park, CA 9402			
Check Box(es) that Apply:	Promoter	Beneficial Owner	T Executive Officer	Director	General and/or
Check Box(es) that Apply.	1 Tolliotei	Belieffelat Owlief	Executive Officer	Director	Managing Partner
Full Name (Last name first, if	individual)			 _	
Mike Levinti	•				,
Business or Residence Address	es (Number and St	reet City State 7in Code)			
	ield Road, Menlo				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Thomas Wei	•			1	
_ 					
Business or Residence Address					
	eld Road, Menlo				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if					
vSpring SBI	C, L.P.				
Business or Residence Address	ss (Number and Str	reet, City, State, Zip Code)			
2825 E. Cott	onwood Parkway	, Suite 460, Salt Lake City	y, UT 84121		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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,		A. BASIC IDENT	IFICATION DATA		
 Each beneficial ow securities of the issu 	ne issuer, if the issue ner having the po- ner; cer and director of	owing: her has been organized with wer to vote or dispose, o corporate issuers and of co			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if American Ri	individual) ver Ventures I, L.	.P.			<u> </u>
Business or Residence Addres 2270 Dougla		reet, City, State, Zip Code) , Roseville, CA 95661			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Nault, Gabe	individual)				
Business or Residence Addres		-	Suite 110, Draper, UT 8	4020	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Richards, Sc					
Business or Residence Address	•				
		· 	Suite 110, Draper, UT 8		
Check Box(es) that Apply:	Promoter	Beneficial Owner	⊠Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Lane, Lori	individual)				
Business or Residence Addres	*) Suite 110, Draper, UT 8	4020	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				·
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)	·			
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)		

					B. INFOR	MATION	ABOUT O	FFERING					
									_ 	· · · · · · · · · · · · · · · · · · ·		Yes	No
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										\boxtimes		
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?													
	<u></u>										Yes	No	
										\boxtimes			
· (Enter the inferommission of a person to be states, list the broker or dea	or similar rese e listed is a e name of the	muneration n associate he broker	n for solici ed person or dealer.	itation of por or agent of If more the	urchasers in a broker of nan five (5)	n connection r dealer reg persons to	n with sales istered with be listed ar	of securities the SEC an	s in the offer d/or with a s	ing. If state or		
Full 1	Name (Last n	ame first, if	individual)									
Dugir	ess or Reside	maa Addras	o (Number	r and Stree	t City Sto	ta Zin Cod	2)						
Dusii	iess of Kesiu	ence Addres	s (Mullioci	and Succ	i, City, Sta	ie, Zip Cou							
Name	of Associate	ed Broker or	Dealer		· · · · · · · · · · · · · · · · · · ·	·							
	in Which Pe												
(C	neck "All Sta	tes" or chec	k individu	al States)	••••							☐ Al	l States
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[R]] [SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P R	.] ———
Full	Name (Last n	ame first, if	individual)	*								
Busir	ness or Resid	ence Addres	ss (Number	r and Stree	et, City, Sta	te, Zip Cod	e)						
Name	of Associate	ed Broker or	Dealer			<u> </u>							
State	s in Which Pe	erson Listed	Has Solic	ited or Int	ends to Sol	icit Purchas	sers						
(C	heck "All Sta	tes" or chec	k individu	al States).								☐ Ai	I States
[AI	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[I D]
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[R]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	{ P R	₹]
Full l	Name (Last n	ame first, if	individual	()									
Busin	ess or Resid	ence Addres	ss (Number	r and Stree	et, City, Sta	ite, Zip Cod	e)					·	
Name	e of Associate	ed Broker or	r Dealer					<u> </u>					
	s in Which P												
(C	heck "All Sta	tes" or chec	k individu	al States)						•••••			I States
[AI		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
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[R]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W I]	[WY]	[P R	-]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Amount Already Aggregate Offering Price Sold Debt Equity Ssee below \$see below Common Common □ Preferred Convertible Securities \$12,664,619.30 \$12,664,619.30 Partnership Interests Other (Specify ____) Total \$12,664,619.30 \$12,664,619.30 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors..... \$12,664,619.30 Non-accredited Investors. Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Security Sold Regulation A Rule 504..... Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs.... Legal Fees \$To be determined Accounting Fees..... Engineering Fees. \$ Sales Commissions (specify finder's fees separately) Other Expenses (identify ____)..... Total \$To be determined

	C. OFFERING PRICE, N	UMBER OF INVESTORS, I	EXPENSES A	ND USI	OF PROCEED	S	
	b. Enter the difference between the aggrega Question 1 and total expenses furnished in res "adjusted gross proceeds to the issuer."	sponse to Part C - Question 4.a	. This differen	ce is the		\$	12,664,619.30
5.	Indicate below the amount of the adjusted gused for each of the purposes shown. If the estimate and check the box to the left of the ethe adjusted gross proceeds to the issuer set for	e amount for any purpose is restimate. The total of the paym	ot known, furnients listed mus	nish an st equal			
					Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees			□ \$			\$
	Purchase of real estate						
	Purchase, rental or leasing and installation	on of machinery and equipment		□ \$	· · · · · · · · · · · · · · · · · · ·		\$
	Construction or leasing of plant building	s and facilities		□ \$			\$ \$
	Acquisition of other business (including offering that may be used in exchange to issuer pursuant to a merger)	r the assets or securities of ano	ther	□ \$			\$
	Repayment of indebtedness						\$4,664,619.37
	Working capital					K	\$7,999,999.93
	Other (specify):			-			
				□ \$_			\$
	Column Totals			□ \$		E	\$12,664,619.30
	Total Payments Listed (column totals add	ded)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		F	\$ 12.664,619.30
		D. FEDERAL SIGNATU	RE				
foll	issuer has duly caused this notice to be sign owing signature constitutes an undertaking by staff, the information furnished by the issuer to	the issuer to furnish to the U.S	. Securities and	l Exchai	nge Commission,	d und upon	der Rule 505, the written request of
Issi	er (Print or Type)	Signature	4		Date		
Ser	force Technologies, Inc.	What All			July 30, 20	04	
Naı	ne or Signer (Print or Type)	Title of Signer (Print or Type)	<u></u>			
Aii	an G. Thompson	President					
	<u>,, ., ., ., ., ., ., ., ., ., ., ., ., .</u>		· ·				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)